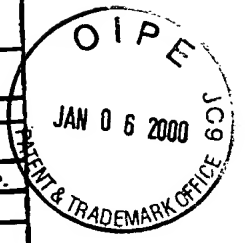


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S1287/7011

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09408,705
FILING DATE 9/29/99
APPLICANT Kenneth Walsh



CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	X					
2						
3						
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10	X					
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22	X					
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26	X					
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34	X					
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TOTAL IND.	8					
TOTAL DEP.	30					
TOTAL CLAIMS	38					

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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						